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ADAPTIVE AND MALADAPTIVE PERSONALITY PROFILES OF ADOLESCENTS FROM DISADVANTAGED SOCIAL SETTINGS: ASSESSING GENDER AND AGE INFLUENCE

Perfiles de personalidad adaptativos e inadaptados de adolescentes de entornos sociales desfavorecidos: Evaluación de la influencia de género y edad

Barcelata Eguiarte B., Gómez-Maqueo, E. y Durán Patiño, C.*

National Autonomous University of Mexico

ABSTRACT

The aim of this study was to analyze the personality adaptation profiles in adolescents from social disadvantaged settings, assessing gender and age, main and interaction effects. A cross sectional study was carried out. A non- probabilistic sample of 352 boys and girls, 13 to 18 years old, from public high-schools was used. The MMPI-A was applied to asses personality and a socio-demographic schedule was also used to assess sociodemographic variables and screening economic adversity. Two groups of personality profiles were compared, adaptive and maladaptive groups, on the basis of T-scores values of MMPI-A. A MANOVA showed personality significant differences between adaptive and maladaptive personality profiles. Main and interactions effects by gender and age were found in the Clinical, Content and Supplementary profiles. Unexpectedly, there were not significant differences by gender. Further research is needed in order to compare different socioeconomic status levels and social settings, nevertheless this data could be provided information to design programs aimed to develop and enhanced adaptive personality traits in adolescents.

Key words: Personality, adolescents, adaptation, social risk, MMPI-A.

Correspondencia: Barcelata Eguiarte B.. Escuela de Psicología. Universidad Nacional Autónoma de Mexico.
E-mail: bareg7@hotmail.com
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RESUMEN

El objetivo de este estudio fue analizar los perfiles de adaptación de la personalidad en adolescentes de entornos desfavorecidos, evaluando el sexo y la edad, los efectos principales y la interacción. Se realizó un estudio transversal. Se utilizó una muestra no probabilística de 352 niños y niñas, de 13 a 18 años, de escuelas secundarias públicas. El MMPI-A se aplicó para evaluar la personalidad y también se utilizó un cronograma sociodemográfico para evaluar variables sociodemográficas y evaluar la adversidad económica. Se compararon dos grupos de perfiles de personalidad, grupos adaptativos y desadaptativos, sobre la base de los valores de T-scores de MMPI-A. Un MANOVA mostró diferencias significativas en la personalidad entre los perfiles de personalidad adaptativos y desadaptativos. Los efectos principales e interacciones por sexo y edad se encontraron en los perfiles clínicos, de contenido y complementarios. Inesperadamente, no hubo diferencias significativas por género. Se necesita más investigación para comparar los diferentes niveles de estatus socioeconómico y los entornos sociales, sin embargo, estos datos podrían proporcionar información para diseñar programas destinados a desarrollar y mejorar los rasgos de personalidad adaptativa en los adolescentes.

Palabras clave: personalidad, adolescentes, adaptación, riesgo social, MMPI-A

RESUMO

O objetivo deste estudo é analizar os perfis de adaptação da personalidade de adolescentes de sentimentos desfavorecidos, avaliando o sexo e a saúde, os efeitos principais e a interacção. Se percebe um estudio transversal. Se utiliza uma mística não probabilística de 352 niños y niñas, de 13 a 18 anos, de escuelas secundarias públicas. El MMPI-A se aplicou para avaliar a personalidade e também para utilizar um cronograma sociodemográfico para avaliar as variáveis sociodemográficas e avaliar a adversidade económica. Esta é uma lista dos grupos de perfis de personalidade, grupos adaptativos e desadaptativos, sobre a base de valores de T-scores de MMPI-A. Un MANOVA mostra as diferenças na personalidade entre os perfis de personalidade adaptativos e desadaptativos. Os efeitos principais e interações por sexo e encontrar-se nos perfis clínicos, de conteúdo e complementares. Inesperadamente, não há diferenças de gênero por gênero. Se necessário, investigar para comparar as diferenças de estatuto socioeconómico e social dos entes queridos, o embargo, os dados podem melhorar a informação para os programas destinados a desenvolver e melhorar as rasgos de personalidade adaptativa nos adolescentes.

Palavras-chave: personalidade, adolescentes, adaptação, riesgo social, MMPI-A

INTRODUCTION

Although the developmental sciences have a long history, some questions remain about the adolescents' development because this is a multifactorial and complex process. The research has evolved from its initial focus on difficulties, to the successful adjustment of children under risk or stress (Masten, 2014). Resilience is a process, as well as, the result, in most of cases, from the interaction across to adaptive systems (Cicchetti, 2010), so, it involves the combination of many risk and protective factors. Deeper understanding of these systems and processes, imply the study of multiple risk-protective factors, for example, social risk, economic hardship or adversity, and personality (Shiner & Masten, 2012). Research has considered that living in a marginalized setting is a risk factor due has been associated with low socioeconomic status (low SES) and other contextual risk factors, however, personality is considered a personal factor which can play a protective role contributing to increment the adaptive process across (Davey, Eacker, & Walters, 2003; Roberts, Kuncel, Shiner, Caspi, & Goldberg, 2007).

Therefore, the approach of this study considers important to assess the presence of a risk condition through some markers as low SES, as well as personality, which are not a pattern absolutely stable during adolescence, considering that adolescents can show a good adjustment within the norm in some dimensions during a specific time but not necessarily in all dimensions all the time, due, the nature changing of this stage of life (Shiner & Masten, 2012; Soto & Tackett, 2015). In this paper, it is also consider that gender and age are two important issue during adolescence which can influenced personality traits. Hence, this study is aimed to identify adaptive and maladaptive personality profiles and explore main and interaction effect of gender and age on personality profiles.

Adolescence is a transitional period of life hallmarked by fast physical and psycho-social changes. Theoretically, developmental models from an ecological perspective have the potential to enhance the understanding of the mechanisms that influence adolescent psychosocial development in multiple contexts. Personal and contextual negative circumstances or risk conditions have been associated with negative outcomes in terms of emotional and behaviour problems (Rutter, 2012). According to research concerned with other features of psychosocial functioning in adolescence, evidence shows that

adolescents from socially disadvantaged family backgrounds living in marginalized and poverty conditions, like economic hardship, occupation and low parental educational level, had been used as markers of risk due their relationship with developmental difficulties in emotional and behavioural domains (Conger, Conger, & Martin, 2010; Sameroff & Rosenblum, 2006). However, there are adolescents that show a good functioning despite of risk or adversity factors, so they are resilient. From developmental psychopathology perspective, resilience is the capacity of individuals to be well adjusted despite exposure to significant risk or stress (Masten, 2014), which depends of a set of personal, familiar and social factors (Rutter, 2012).

One of the main objectives from the field of resilience research, is the understanding of adaptation profiles and mechanisms of adolescents living under risk conditions. Marginalized contexts, frequently are associated with poverty, has been considered a risk factor during adolescence, since it is also associated with other psycho-social risks (e.g. higher rates of stressful life events, delinquency, violence, maltreatment, family neglected), which increase adolescents' physical and emotional vulnerability (Costa et al., 2005; WHO, 2012). Even more, low SES is associated with economic adversity and can be a chronic stressor and predictor of adolescents' symptoms (Leventhal & Brooks-Gunn, 2000). Therefore, low SES is the most commonly studied sociodemographic variable in risk-resilience research. Nevertheless, family economic income is one of the main poverty marker, empirical evidence shows that education level and occupation of parents of adolescents are two strong indicators of economic adversity and poverty, and also a risk family marker (Conger et al., 2010; Repetti, Taylor, & Seeman, 2002; Sameroff & Rosenblum, 2006).

There are some adolescents who have relatively good outcomes, showing adaptive behaviour, in spite of poverty conditions or economic adversity, so, they are considered resilient and most of them show a set of distinctive personality traits (Davey et al., 2003; Shiner, 2009). Personality is a set of individual's characteristic (e.g behaviors, feelings, cognitions, attitudes) that arise on childhood to adolescence and can contributed to adapt to changing of life (Robert et al., 2007; Shiner & Caspi, 2003). During adolescence, personality is an important issue that can be a risk or protective factor depending of circumstances (Hambrick & McCord, 2010; Soto & Tackett, 2015). There is evidence that some personality characteristics, for example, low self-esteem and social introversion

are associated with depressive symptoms (Connor-Smith & Flashbart, 2007) and can be precursors of clinical depression in late adolescence or adulthood (Block, Gjerde, & Block, 1991; Chuang, Lamb, & Hwang, 2007), or suicide behavior (Lucio & Hernandez, 2009). Also personality as antisocial and breaking rules behaviour, are related to delinquency (Glaser, Calhoun, & Petrocelli, 2002), besides taking-risk behaviors (Shiner & Caspi, 2003), and abuse of drugs Komro et al., 2001; Sher, Bartholow, & Wood, 2000; Vinet, Faúndez, & Larraguibel, 2009).

On the other hand, in risk contexts a strong personality, also denominated hardiness or ego-resiliency, can be a protective factor and may be a difference between adaptive and maladaptive behavior (Chuang et al., 2006; Letzring, Block, & Funder, 2005). Other studies had shown that, personality characteristics as being extroverted, optimistic, structured, and to have a high self-esteem, are associated with resilience (Davey et al., 2003; Peng et al., 2012). Moreover, personality, frequently is associated with a set of other variables as coping which can improve adaptation (Carver & Connor-Smith, 2010; Hambrick & McCord, 2010). Personality can also be a strong predictor of coping, as well as, positive outcomes (Connor-Smith & Flashbart, 2007; Lam, & McBride-Chang, 2007, Shiner, 2009, Shiner & Masten, 2012).), even in disadvantaged social contexts (Barcelata, Luna, Lucio, & Durán, 2016).

Regarding, gender and age differences, international evidence have been reported that boys presenting more externalizing behavior, extraversion and antisocial personality traits than girls whom shows more internalizing behaviors, anxiety and depressive traits (Connor-Smith & Flashbart, 2007; Hambrick & McCord, 2010; Lam & McBride-Chang, 2007) Many developmental issues as personality show important changes over time, in adolescence due to biological maturity which contribute to enhance processes, for example, empathy, self-confidence, and coping. Younger adolescents show more levels of impulse control, maturity, self-esteem, and emotional regulation and report less anxiety, family and school problems (Sholte et al., 2005). Therefore, the longitudinal research has provided data about the changes in personality characteristics during adolescence (Block et al., 1991; Shiner & Masten, 2012).

METHOD

Present Study

The importance of personality profiles and psychological adjustment in normative and non-normative conditions have been consistently documented, however, there is, relatively few research focuses on adolescents living in marginalized settings, despite personality play a central role in adaptation processes, either, as risk or protective factor, particularly to adapting to adversity conditions along this developmental stage. Given differences by gender in personality traits and changes of personality during adolescence, are two target variables in this study. Therefore, early detection of adaptive or maladaptive profiles could be the basis for designing programs from a resilience framework based in evidence, since as personality during adolescence it is not yet fully structured it can be modified. However, most of studies involve clinical samples or university students, there is relatively little research aimed to evaluated disadvantaged adolescent groups. Specifically, it is important to distinguish adaptive and maladaptive personality profiles of adolescents who live in disadvantages conditions, in order to design early preventive based-school programs to enhance positive adaptation despite the multiple risks that represent live in marginalized settings. The aims of this study were twofold: 1. Compare adaptive and maladaptive personality profiles of adolescents living in marginalized settings and economic adversity, and, 2. Analyze possible main and interaction effects of gender and age on personality profiles. Two hypothesis were also addressed: Hypothesis: 1. There will be significant and statistically differences between adaptive and maladaptive personality profiles group of adolescents, with first scoring higher in Clinical, Content and Supplementary scales of MMPI-A, which assess negative traits of personality; 2. There will be main and interaction effects of gender and age on personality profiles. Hence, it conducted a cross-sectional, ex post facto study, with a design 2x2 (gender: male/female; age: 13 to 15 years/16 to 18 years).

Participants

Data of this study corresponding to 352 adolescents, 48.30% boys and 51.70% girls, with economic strain, from 13 to 18 years old (M_{age}=15.4; *SD*=1.39), divided in two groups, according to age: 50% early adolescents aged 13 to 15 years, and 50% late adolescents aged16 to 18 years, all of them intentionally recruited from a large sample of

students (N=495) who attended two public high-schools located in disadvantaged and marginalized areas from Mexico City (National Population Council, 2015.).

Measures

Minnesota Multiphasic Personality Inventory for Adolescents

The Mexican adolescents version was used (Lucio, 1998), which consists of 478 dichotomous true/false items, divided in 4 types of profiles or scales that assess personality characteristics and adaptation. 1. Validity Scales, assess the responding attitude to the test, indicating the reliability and validity of the data; 2. Clinical scales, assess personality traits and psychiatric symptomatology like depression, anxiety, schizophrenia, antisocial behavior, among others; 3. Content scales detect specific contents such as low self-esteem, anger, obsessive traits, alienation; and 4. Supplementary scales provide information about the maturity level of the adolescent, as well as the tendency to acceptance of and vulnerability to alcohol-and-drug use. The MMPI-A (Butcher et al., 1992) is one of the most frequently used self-report measure to identify personality characteristics and adaptation in adolescents in multiple contexts (clinical and school setting, social risk, and also, produce borderline profiles (Archer, Handel, & Lynch, 2001; Archer, Handel, Lynch, & Elkins, 2002; Barcelata et al., 2016). It is a useful multidimensional measure in discriminating adaptive and maladaptive adolescents outcomes (Archer et al., 2001), since it provides T scores. A T score >65 denotes the presence of behavioral or emotional problems.

Socio-demographic Questionnaire

Created for Lucio, Durán, Barcelata and Hernández in 2007. Question booklet from the MP6-11 "Prevention and support for UNAM high-school students" project. The socio-demographic section was composed by 33 multiple-choice items exploring socio-demographic characteristics of the adolescent and his parents, such as gender, age, level education and occupation and marital status.

Procedure

Permission from the school authorities of municipalities with low rates and medium degrees of marginalization was requested (National Population Council, 2015). Informed consent was obtained to ensure the voluntary and anonymous participation of adolescents. Measures were administered to 495 students in the classroom in a regular schedule, in a 120-minutes with a 15-minute recess. Just 352 adolescents from the original sample (N=495) were included on the basis of two criterion: 1. Presence, at least, of three economic adversity markers (e.g. low parent' school level, low parent´s occupation status, and low adolescent's daily income); and, 2. Adolescents should be responded to MMPI-A according the validity indicators recommended: L≤T70, F ≤T90, K≤T70, VRIN≤7 and TRIN≤13 (Archer et al., 2002; Butcher et al., 1992; Lucio, 1998). The rest of cases were dropped from further analyses, resulting in a final sample of 352 adolescents.

Two groups of adaptive (N=228) and maladaptive personality profiles (N=124) were compared on the basis of T-score values. Personality profiles with three or more clinical scales ≥T65 were considered high or "out layer" of normal range, therefore, were considered maladaptive personality profiles (MP); whereas normal or adaptive personality profiles (AP) were those with less of three scales ≥T65 (Butcher et al., 1992; Lucio, 1998).

Statistical Analysis

Descriptive analyses of socio-demographic were computed, as well as, normality tests. Multivariate analyses (MANOVA) was conducted to analyse the possible main and interaction effects of gender and age, on personality profiles were tested using, the SPSS 21.

RESULTS

The characteristic sociodemographic of participants considered as indicators of low SES or economic adversity are presented in Table 1. For example, father´s and mother´s level of education is lower in the maladaptive profile adolescent´s group (MP) than adaptive profile adolescent´s group (AP). Furthermore, both, fathers and mothers of MP adolescents' group have lower status jobs, than AP adolescents' group, although, most of

mother are housewives in both groups. Besides, in both groups around the 50% the father is the main provider, however, mothers also contribute to economic income of families.

Table 1.
Sample characteristics

Economic adversity indicators	Parent´s Educational Level	Adaptive profile group n= 224	Maladaptive profile group n=128
Father's Education	High-School	41.8%	36.1%
	Elementary	32,1%	41.3%
	No studies	8.0%	54.5%
Mother's Education	High-School	45.2%	42.6%
	Elementary	33.9%	35.7%
	No studies	.9%	5.2%
Father's Occupation	Employee	49.1%	44.3%
	Farmer/worker	21.3%	18.3%
	Unemployed	3.6%	6.2%
Mother's Occupation	Housewife	47.8%	53.9%
	Farmer/worker	29.1%	28.7%
	Employee	19.1%	28.7%
	House worker	65%	10.4%
	Unemployed	6.1%	1.9%
Household Head	Father	49.8.%	45.2%
	Both	19.6%	23.6%
	Mother	237.5%	26.1%
Daily spending money	$\leq$ 1 dollar/day	82.6%	86.1%
	$\geq$ 1 dollar/day	17.4%	13.9%

Table 2 present boys and girls, maladaptive profiles (MP) which showed the highest T-scores values (>60) scoring around or nearest of cutoff point of normal range (T65). Specifically younger girls, showed the higher T-scores values in most of Clinical Scales, which indicates behavioral and emotional problems, such as depression, anxiety, schizoid traits. However, older girls show the higher score in scales related with hypochondriasis and antisocial behavior. On the other hand, boys showed the highest T-scores values in Paranoia and Mania, which are related with thinking and impulse control disorders. On the contrary, AP group showed the lowest T values, most of them, within the normal range (<T65).

Table 2

Means and standard deviation of adaptive and maladaptive of MMPI-A personality clinical profiles

	Adaptive profile group N=228								Maladaptive profile group N=124							
	Boys n=110				Girls n=118				Boys n=77				Girls n=47			
	Age group 13-15 n=70		Age group 16-18 n=40		Age group 13-15 n=79		Age group 16-18 n=39		Age group 13-15 n=56		Age group 16-18 n=21		Age group 13-15 n=29		Age group 16-18 n=18	
Content Scales	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*
A-Anx	50.21	6.97	47.68	8.84	48.15	7.32	46.51	8.48	60.23	9.97	57.57	9.63	59.1	8.71	61.56	11.57
A-Obs	50.14	8.39	46.63	8.25	47.3	6.96	45.49	7.47	59.32	11	56.86	10.9	57.97	11.74	61.17	11.94
A-Dep	50.33	7.68	48.45	8.18	49.51	6.33	45.9	7.86	61.38	6.84	59.38	10.98	53.5	9.43	50.65	11.59
A-Hea	54.3	10.6	48.85	8.78	55.44	9.25	52.13	11.34	63.34	9.58	55.43	12.58	63.8	11.31	64.39	12.83
A-Ali	50.39	7.84	47.68	7.73	50.39	7.66	46.87	7.15	61.39	8.29	63.95	9.95	60.38	7.26	60.5	8.53
A-Biz	51.56	9.07	48.9	9.8	52.94	9.38	47.26	8.39	63.77	9.97	59.52	15.94	61.1	8.44	57.5	10.24
A-Ang	49.21	8.24	46.28	9.3	47.81	7.36	44.64	8.53	58.36	9	55.43	9.45	57.41	10.27	57.17	11.26
A-Cyn	48.17	9.51	49.1	9.85	47.87	7.89	47.15	10.57	53.21	9.96	58	10.55	53.28	9.89	55.72	11.51
A-Con	48.37	8.25	47.78	8.34	47.89	8.92	48.13	9.88	62.2	9.67	58.62	11.6	60.31	9.33	59.61	10.44
A-LSE	50.34	7.45	48.88	8.34	49.47	7.4	46.41	6.65	60.71	7.97	58.71	10.31	61.9	8.42	60.17	7.15
A-LAS	55.54	8.82	49.95	9.26	52.87	8.01	50.46	7.81	61.05	10.72	61.95	11.68	64.41	7.69	62.61	7.77
A-Sod	52.77	9.37	49.78	9.53	51.19	8.37	50.03	9.43	56.29	8.27	58.05	10.52	56.31	9.09	51.72	9.46
A-Fam	52.7	6.63	47.13	8.73	51.97	7.91	47.9	7.54	63.02	6.42	62.76	9.91	62.48	8.86	64.39	7.7
A-Sch	51.29	8.24	48.48	8.59	51.03	7.68	48	7.45	67.27	10.79	64.05	9.36	61.83	10.48	65.17	7.27
A-Trt	51.96	7.48	47.95	7.6	51.13	7.45	47.62	7.6	62.18	9.82	61.52	10.06	62.72	9.1	60.78	10.53

Note: Mean scores corresponding to T-scores values Hs. Hypochondriasis, D. Depression, Hy. Conversion Hysteria, Dp. Psychopathic Deviate, Mf. Masculinity-Femininity, Pa. Paranoia, Pt. Psycastenia, Sc. Schizophrenia, Ma. Hypomania, Si. Social Introversion.

Regarding personality profiles of Content Scales, table 3 shows that younger boys and girls of MP group both, younger boys and girls showed the highest values. T-scores values (> 60) scored in the border point of normal profiles, specifically in Health Problems, Bizarre Behavior, Limited Aspirations, School, and Family Problems, which shows behavioral and emotional problems in the personal, family and school domains. On the contrary, AP group, presented the lower T-scores values in all Content Scales, within the norm; however, the younger adolescents showed the highest values in most of scales.

Table 3

Means and standard deviation of adaptive and maladaptive of MMPI-A personality content profiles

	Adaptive profile group N=228								Maladaptive profile group N=124							
	Boys n=110				Girls n=118				Boys n=77				Girls n=47			
	Age group 13-15 n=70		Age group 16-18 n=40		Age group 13-15 n=79		Age group 16-18 n=39		Age group 13-15 n=56		Age group 16-18 n=21		Age group 13-15 n=29		Age group 16-18 n=18	
Content Scales	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*
A-Anx	50.21	6.97	47.68	8.84	48.15	7.32	46.51	8.48	60.23	9.97	57.57	9.63	59.1	8.71	61.56	11.57
A-Obs	50.14	8.39	46.63	8.25	47.3	6.96	45.49	7.47	59.32	11	56.86	10.9	57.97	11.74	61.17	11.94
A-Dep	50.33	7.68	48.45	8.18	49.51	6.33	45.9	7.86	61.38	6.84	59.38	10.98	53.5	9.43	50.65	11.59
A-Hea	54.3	10.6	48.85	8.78	55.44	9.25	52.13	11.34	63.34	9.58	55.43	12.58	63.8	11.31	64.39	12.83
A-Ali	50.39	7.84	47.68	7.73	50.39	7.66	46.87	7.15	61.39	8.29	63.95	9.95	60.38	7.26	60.5	8.53
A-Biz	51.56	9.07	48.9	9.8	52.94	9.38	47.26	8.39	63.77	9.97	59.52	15.94	61.1	8.44	57.5	10.24
A-Ang	49.21	8.24	46.28	9.3	47.81	7.36	44.64	8.53	58.36	9	55.43	9.45	57.41	10.27	57.17	11.26
A-Cyn	48.17	9.51	49.1	9.85	47.87	7.89	47.15	10.57	53.21	9.96	58	10.55	53.28	9.89	55.72	11.51
A-Con	48.37	8.25	47.78	8.34	47.89	8.92	48.13	9.88	62.2	9.67	58.62	11.6	60.31	9.33	59.61	10.44
A-LSE	50.34	7.45	48.88	8.34	49.47	7.4	46.41	6.65	60.71	7.97	58.71	10.31	61.9	8.42	60.17	7.15
A-LAS	55.54	8.82	49.95	9.26	52.87	8.01	50.46	7.81	61.05	10.72	61.95	11.68	64.41	7.69	62.61	7.77
A-Sod	52.77	9.37	49.78	9.53	51.19	8.37	50.03	9.43	56.29	8.27	58.05	10.52	56.31	9.09	51.72	9.46
A-Fam	52.7	6.63	47.13	8.73	51.97	7.91	47.9	7.54	63.02	6.42	62.76	9.91	62.48	8.86	64.39	7.7
A-Sch	51.29	8.24	48.48	8.59	51.03	7.68	48	7.45	67.27	10.79	64.05	9.36	61.83	10.48	65.17	7.27
A-Trt	51.96	7.48	47.95	7.6	51.13	7.45	47.62	7.6	62.18	9.82	61.52	10.06	62.72	9.1	60.78	10.53

Note: Mean scores corresponding to T-scores values

A-Anx. Adol. Anxiety, A-Obs. Adol. Obsessiveness, A-Dep. Adol. Depression, A-Hea. Adol. Health Concerns, A-Ali. Adol. Alienation, A-Biz. Adol. Bizarre Mentation, A-Ang. Adol. Anger, A-Cyn. Adol. Cynicism, A-Con. Adol. Conduct Problems, A-LSE. Adol. Low Self-Esteem, A-Las. Adol. Low Aspirations, A-Sod. Adol. Social Discomfort, A-Fam. Adol. Family Problems, A-Sch. Adol. School Problems, A-Trt. Adol. Negative Treatment Ind.

Concerning supplementary profiles, data are similar that other scales or profiles MP group showed higher T-scores values than the AP group, with the youngest boys scoring higher in the scales that reflects problems with alcohol use. Nevertheless, oldest girls showed the highest T-scores values in Alcohol/Drug Problem Acknowledge and Alcohol/Drug Problem Proneness, whereas the youngest girls showed the highest T scores in Immaturity and youngest boys in scales related to alcohol abuse and anxiety. On contrast AP group showed low level of anxiety and higher level of repression (Table 4)

Table 4

Means and standard deviation of adaptive and maladaptive of MMPI-A personality supplementary profiles

	Adaptive profile group N=228								Maladaptive profile group N=124							
	Boys n=110				Girls n=118				Boys n=77				Girls n=47			
	Age group 13-15 n=70		Age group 16-18 n=40		Age group 13-15 n=79		Age group 16-18 n=39		Age group 13-15 n=56		Age group 16-18 n=21		Age group 13-15 n=29		Age group 16-18 n=18	
Supplementaty Scales	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*	*M*	*SD*
MAC-R	49.06	9.19	48.38	6.99	49.09	9.22	46.33	9.95	62.57	10.81	58.95	7.54	58.69	10.35	57.89	8.85
ACK	52.87	8.97	51.03	10.53	53.82	9.83	50.62	12.11	60.63	10.23	57.95	9.77	63.07	10.18	63.89	9.68
PRO	49.51	8.92	47.85	9.93	49.46	7.52	49.23	7.32	61.71	10.00	60.52	10.03	59.45	9.85	62.94	7.57
IMM	53.07	7.75	47.75	7.50	51.49	6.75	48.18	8.87	65.00	7.56	65.00	6.32	66.52	8.10	63.89	8.72
A	49.81	7.38	48.33	8.76	48.14	7.21	44.82	7.31	60.45	8.16	57.52	10.62	59.31	7.78	59.83	9.69
R	52.80	11.69	49.48	7.99	52.38	11.09	55.79	9.85	47.11	11.89	46.33	9.67	50.10	12.74	49.39	11.56

Note: Mean scores corresponding to T-scores values
MAC-R. MacAndrew Alcoholism-Revised, ACK. Alcohol/Drug Problem Acknowledge, PRO. Alcohol/Drug Problem Proneness, INM. Immaturity, A. Anxiety, R. Regression

The univariate analyses show significant differences between adaptive and maladaptive personality profiles. Adaptive personality profiles presents higher in repression (F=3.79; p=.001) and impulse control (F=6.75; p=.045) whereas in maladaptive personality profile´s group the highest T-scores values, corresponding mainly to Hypomania (F=5.48; p=.022), Anxiety (F=4.99; p=. 39) and substance abuse (F=4.75; p=.026). On the other hand the multivariate analyses show a main effect of age on personality with a strong effect size; however, gender and interactions gender*age on personality did not significant.

Table 5.

MANOVA´s Multivariate test: Main and interaction effects of gender, group of age on adaptation personality profiles

Effect	Value	*F*	Hypothesis df	Error df	Sig.	η^2
Intercept	.007	15652.35e	3.000	342.00	<.001	.993
Gender	.988	1.344	3.000	342.00	.220	.013
Age	.040	4.525	3.000	342.00	.004	.038
Gender*Age	.018	.521	12.000	342.00	.901	.006

Note: *F= Wilks' Lambda*

Table 6 show statistically significant main effect of age on all Clinical, Content and Supplementary personality profiles. Particularly Clinical personality profiles show a moderate effect, but, higher than Content or Supplementary profiles, which presented a weak effect size. On the other hand, data show an interaction effect of gender and age only on Clinical profile with a weak effect size, it means, that the age es a sensible variable on personality.

Table 6.

MANOVA´s Between subjects test: Main and interaction effects of gender and group of age on clinical, content and supplementary personality profiles

Source	Dependent Variable	Type III Sum of Squares	df	Mean Square	*F*	Sig.	η^2
Intercept	Clinical Profile	684758.381	1	684758.381	26434.656	<.001	.987
	Content Profile	822655.002	1	822655.002	34598.308	<.001	.990
	Supplementary Profile	816764.401	1	816764.401	42275.394	<.001	.992
Gender	Clinical Profile	11.552	1	11.552	.446	.505	.004
	Content Profile	5.336	1	5.336	.224	.636	.004
	Supplementary Profile	13.508	1	13.508	.669	.404	.009
Age	Clinical Profile	328.559	1	328.559	12.684	<.001	.036
	Content Profile	219.217	1	219.217	9.220	.003*	.029
	Supplementary Profile	139.522	1	139.522	7.222	.008*	.023
Gender*Age	Clinical Profile	2234.347	3	2234.347	185.980	.050*	.019
	Content Profile	1137.458	3	1137.458	76.685	.129	.015
	Supplementary Profile	1487.827	3	1487.827	98.685	.089	.017

R cuadrado = .457 (*R* cuadrado corregida = .446)
R cuadrado = .539 (*R* cuadrado corregida = .529)
R cuadrado = .505 (*R* cuadrado corregida = .494)

DISCUSSION

The aim of this study was to analyze the personality profiles of adolescents in psychosocial risk settings and the possible effect of gender and group of age in the personality adaptation. There were two central questions: there are statistically and significant differences between the adaptive and maladaptive personality profiles? There are a main and interaction effect of gender and age on personality adaptation? As it was hypothesized, adolescents of maladaptive personality (MP) profile group showed higher values than adolescents of adaptive personality (AP) profiles group in most of Clinical Content and Supplementary scales. Although, data show that MP group of adolescents are more likely to present high T-scores values in some clinical scales that imply risk for develop behavior and emotional problems. Although the T-scores values are all below of the cutoff *T*-score T65, considered "normal range", except in Pa and Sc in boys, however, most of the clinical scales scoring around T60, other cutoff in normative samples that can be considered borderline (Hand, Archer, Handel, & Forbey, 2007), including the AP group. Hence, this sample can be considered a risk or vulnerable group (Shiner, 2009; Shiner & Caspi, 2003). Nevertheless, did not founded gender effect on adaptive or maladaptive personality profiles.

Age showed and effect in adaptive personality profile, and in maladaptive personality profiles, or, behavioral and emotional problems. These findings are according to statements of theoretical models of adolescent development and empiric evidence, which suggest that age is an important issue in a process of maturity during adolescence (Chuang et al., 2006; Masten, 2014; Walters, 2006). This data suggests that younger girls present personality profiles with more markers of metal health risk than other groups, showing behavioral and emotional problems associates, health problems, less self-esteem, low aspirations, and immaturity, whereas older girls report more levels of anxiety, obsessiveness, family problems, and acknowledge of use and abuse of alcohol as previous reports (Barcelata et al., 2016, Lucio & Hernández, 2009; Vinet, 2009). The higher T-scores values of the MP group revealed also characteristics associated with antisocial personality, delinquency, lack of trust in others and substance abuse, particularly in boys as others studies with offender adolescents related with delinquency behavior (Glaser et al., 2002; Sher et al, 2000; Vinet et al., 2009). Some of these behavioral and emotional problems are similar that those of the highest indexes in the National Adolescents Mental Health Survey (Benjet et al., 2009) and

others reports (Walter, 2010), mainly in younger boys and girls. On the other hand, AP group are more extroverted and open to new experiences; show more impulse control, and higher levels of maturity (Barcelata et al., 2016; Chuang et al., 2006; Davey et al., 2003; Hambrick, & McCord, 2010; Lucio, & Hernández, 2009).

Some of the emotional and behavior problems identified in this adolescents can lead to more serious problems in late adolescence and adulthood as mentioned previous findings (Blonigen et al., 2008; Chuang et al., 2006; Shiner & Masten, 2012). The problems detected specially in young girls may be are related to the social environment in which they live, for example, with their low self-esteem and low aspirations and probably also with the differences in education with respect to gender, which is relevant in Mexico, particularly in lower *SES*. Some of this girls think they are going to get married soon, so they don't visualize they can study and be more independent.

These results could be a guide the early detection of risk personality profiles, as well as, in designing intervention based-school programs in disadvantaged adolescents living in marginalizing and social risk settings (Komro et al., 2001). These programs should enhance they aspiration, future goals, and coping strategies to deal with margination and economic adversity. But also these findings show that there must be government programs to improve the social situation of these groups of disadvantaged youth. If these adolescents at risk can be included in intervention programs, behavior disorders in adulthood could be prevented and resilience can be enhanced because as other authors have pointed out childhood personality development can predict disorders in adulthood (Blonigen et al., 2008; Rutter, 2012, Shiner, 2009, Shiner & Masten, 2012). It is also important to design programs with adolescents at risk who present adaptive personality traits, for example extraversion and self-control (assessed by IMM scale) in 16 to 18 years girls of the adaptive group, since these traits have found to be related with resilience (Shiner & Masten, 2012).

In sum, identifying adaptive, maladaptive and borderline personality profiles, can be important to designing mental health action from a preventive perspective, so these finding could guide the intervention programs with disadvantaged youth. Since there are some limitations of this study, it is recommended that future work examine the role of personality on resilience outcomes in adolescents and to explore these personality issues with other

samples, due that Mexican adolescents tend to report more problems that others adolescents may be due cultural factors.

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